REQUIRED SUBMISSIONS: The Application for a Certificate of Appropriateness shall be accompanied by the Exhibits listed by Project Type in the attached Town of Bar Harbor's Land Use Ordinance, Chapter 125, Table 2.

- > Applications submitted less than one week prior to a Design Review Board meeting will not be considered at that meeting.
- ➤ Please submit 10 copies of the application and attach color copies of all materials to be considered.
- ➤ A \$26.00 fee is required for submitting a Design Review Board Application
- ➤ Prior to making application for a Certificate of Appropriateness, the applicant shall familiarize herself/himself with the requirements and procedures of the Design Review portion of the Town of Bar Harbor's Land Use Ordinance, and operating procedures of the Design Review board. Copies of the procedures, standards, and the Design Review Handbook may be obtained from the Planning Department.
- > Applicants are encouraged to meet informally with the Town Planner or Code Enforcement Officer to discuss their project prior to preparing and submitting an application or making any binding arrangements for the proposed improvements.

A BUILDING PERMIT APPLICATION IS ALSO REQUIRED

## BAR HARBOR DESIGN REVIEW BOARD APPLICATION FOR CERTIFICATE OF APPROPRIATENESS

I. General Information Date: Project Location:	II. Type of Project
Business Name:	□ Sign □ Awning
	Demolish or Relocate Historic Bldg
Name, Address and <b>Phone</b> # of Applicant:	☐ Alter exterior of Historic Building ☐ Construct or expand non-Historic Bldg
	Construct or alter fence or wall
	and vending machines
Name and Address of Property owner:	Seasonal Closures
(LETTER OF AUTHORIZATION ATTA	CHED) Other
Name and Address of Architect or Engineer:	
III. Project Description: clearly indicate size, sign(s)/awnings, brackets, etc.	shape, material, texture, color, height of
IV. Road Frontage Measurement: length in fo	eet of road frontage of property:
V. Existing Signage Measurement: square fo (If multi-tenant building MUST have signage	
SIGNATUDE	OF A PPLICANT

(COPY THIS PAGE ONLY)